

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 609 OF 5408

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
DSCC

Full Name (Last, First, Middle Initial) A. ASHRF SAAD		Date of Receipt MM / DD / YYYY 08 / 31 / 2015 Transaction ID : VN874BYM3A9
Mailing Address 6934 COLEMAN ST		Amount of Each Receipt this Period 500.00
City DEARBORN	State MI	Zip Code 48126-1776
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. NANCY L SACK		Date of Receipt MM / DD / YYYY 08 / 31 / 2015 Transaction ID : VN874BZDKR9
Mailing Address 7 LEELAND TER		Amount of Each Receipt this Period 200.00
City LEXINGTON	State MA	Zip Code 02421-4515
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. BEVERLY SACKETT		Date of Receipt MM / DD / YYYY 08 / 25 / 2015 Transaction ID : VN874BYDNX1
Mailing Address 10578 CHEVIOT DR		Amount of Each Receipt this Period 150.00
City LOS ANGELES	State CA	Zip Code 90064-4353
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶

850.00

TOTAL This Period (last page this line number only).....▶

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